



Attorney's Docket No. 0388-031709

## TRANSMITTAL LETTER

Mail Stop AMENDMENT  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Serial No.: 10/652,583Filing Date: August 29, 2003Examiner: Donald W. UnderwoodGroup Art Unit: 3652Invention: Boom Assembly For Swiveling Utility Vehicle

Transmitted herewith is an Amendment in the above-identified application.

- Small Entity Status is/has been asserted for this application under 37 CFR 1.27.  
 A verified statement to establish small entity status under 37 CFR 1.27 is enclosed.  
 No additional fee is required.  
 Petition for One-Month Extension of Time  
 The fee has been calculated as shown below:

No. of Claims	Highest No. Previously Paid For	Present Extra	Small Entity Rate	Non-Small Entity Rate	Charge
Total <u>4</u>	<u>20</u>	<u>0</u>	x \$ 25.00	x \$ 50.00	\$ _____
Indep. <u>1</u>	<u>3</u>	_____	x \$ 100.00	x \$ 200.00	\$ _____

First Presentation of Multiple Dependent Claim/s      TOTAL ADDITIONAL FEE      \$ \_\_\_\_\_

- Please charge Deposit Account No. 23-0650 \$120.00 for a Petition for One-Month Extension of Time.  
 The Commissioner is hereby authorized to charge payment of the following fees associated with this communication to Deposit Account No. 23-0650. Please refund any overpayment to Deposit Account No. 23-0650. An original and two copies of this sheet are enclosed.  
 Any additional filing fees required under 37 CFR 1.16.  
 Any patent application processing fees under 37 CFR 1.17.

December 30, 2005  
Date

By   
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I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on December 30, 2005.

Chris P. Craig  
Date  
Signature  
Chris P. Craig  
Typed Name of Person Signing Certificate



Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

PTO/SB/17 (12-04-2)  
Approved for use through 07/31/2006. OMB 0651-0032  
U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Effective on 12/08/2004.

Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818)

# TRANSMITTAL For FY 2005

Applicant claims small entity status. See 37 CFR 1.27

**TOTAL AMOUNT OF PAYMENT** (\$ 120.00)

Complete if Known	
Application Number	10/652,583
Filing Date	August 29, 2003
First Named Inventor	Takatoshi SUGIMOTO
Examiner Name	Donald W. Underwood
Art Unit	3652
Attorney Docket No.	0388-031709

## METHOD OF PAYMENT (check all that apply)

<input type="checkbox"/> Check	<input type="checkbox"/> Credit Card	<input type="checkbox"/> Money Order	<input type="checkbox"/> None	<input type="checkbox"/> Other (please identify): _____
<input checked="" type="checkbox"/> Deposit Account	Deposit Account Number:	23-0650	Deposit Account Name	_____

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

- Charge fee(s) indicated below       Charge fee(s) indicated below, except for the filing fee  
 Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17       Credit any overpayments

**WARNING:** Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

## FEE CALCULATION

### 1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Small Entity	Fee (\$)	Small Entity	Fee (\$)	Small Entity	Fee (\$)	
Utility	300	150	500	250	200	100	_____
Design	200	100	100	50	130	65	_____
Plant	200	100	300	150	160	80	_____
Reissue	300	150	500	250	600	300	_____
Provisional	200	100	0	0	0	0	_____

### 2. EXCESS CLAIM FEES

#### Fee Description

Each claim over 20 (including Reissues)

Each independent claim over 3 (including Reissues)

Multiple dependent claims

Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Small Entity	Fee (\$)	Fee (\$)
4 - 20 or HP =	0	x 0	= 0	50	25	

HP = highest number of total claims paid for, if greater than 20

Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims	Fee (\$)	Fee Paid (\$)
1 - 3 or HP =	0	x 0	= 0	200	100	

HP = highest number of independent claims paid for, if greater than 3

### 3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under

37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof.

See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(g).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
- 100 =	0 / 50 =	(round up to a whole number)	x	=

### 4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): Petition for One-Month Extension of Time

120.00

SUBMITTED BY		Registration No. (Attorney/Agent)	Telephone
Signature		54,771	412-471-8815
Name (Print/Type)	Craig M. Waller	Date	December 30, 2005

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments or suggestions you have concerning the burden you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.